MANUALLY EXECUTED

U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 TEMPORARY FORM D

SEC Mall Mail Processing Section OMB APPROVAL

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NOTICE OF SALE OF SECURITIES QUO

PURSUANT TO REGULAÇION D, SECTION 4(6), AND/OR 106

UNIFORM LIMITED OFFERING EXEMITION								
Name of Offering (che	ck if this is an amendment and name has chang	ed, and indicate change.)						
ROCKBAY CAPITAL COMMITMENT OFFSHORE FUND, LTD.								
Filing Under (Check box(es) that apply): Type of Filing: New Filing	Rule 504 Rule 505 Amendment	Rule 506 Section 4(6)	ULOE					
	A. BASIC IDENTIFI	ICATION DATA						
1. Enter the information requested about	the issuer							
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)								
ROCKBAY CAPITAL COMMITMENT OFFSHORE FUND, LTD.								
Address of Executive Offices		(Number and Street, City, State, Zip Code	(Including Area Code)					
c/o Rockbay Capital, LLC, 600 Fifth Avenue 24th Floor; New York, NY 10020 (212) 332-4220								
Address of Principal Business Operations		(Number and Street, City, State, Zip Code)						
(if different from Executive Offices)	MAD 0 7 2000		(Including Area Code)					
	MAR 2 7 2009		()					
Brief Description of Business	THOMSONREUTERS							
Securities investment	IUDIAIODIAIVEDIEVO							
Type of Business Organization corporation	☐ limited partnership, already formed	other (please specify):	(METER SEARCE COLUMN STATE COLU					

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

CN for Canada; FN for other foreign jurisdiction)

limited partnership, to be formed

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[F][N]

Cayman Islands exempted company

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GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

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Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

Actual or Estimated Date of Incorporation or Organization:

State:

business trust

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. □ Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Goodall, Ian Business or Residence Address (Number and Street, City, State, Zip Code) International Management Services, Ltd, 4th Floor, Harbour Centre, George Town, Grand Cayman Executive Officer □ Director General and/or Promoter Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Lang, Martin Business or Residence Address (Number and Street, City, State, Zip Code) International Management Services, Ltd, 4th Floor, Harbour Centre, George Town, Grand Cayman Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. II	NFORM.	ATION	ABOUT	OFFER	RING				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								,,,	Yes No					
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?									*\$ 1,000,000					
*Minimum may be waived by the Fund in its discretion.									· · · · · · · · · · · · · · · · · · ·					
										Yes №				
3.		•												
4,	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Name	e (Last nar	ne first, if	individual)								•			
Business	or Residen	ce Addres	s (Number a	end Street,	City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer							•				
rume or a			Deare.											
States in \	Which Pers	son Listed	Has Solicite	d or Inten	ls to Solici	t Purchasers	3							
(Check '			individual 5											All States
	[AL] [IL]	[AK] [lN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	(CT) (ME)	[DE] [MD]	(DC) [MA]	[FL] [Ml]	[GA] [MN]	(HI) [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	(NJ) (TX)	[NM] [UT]	[NY] {VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	(OR) [WY]	[PA] [PR]	
Full Name	e (Last nan	ne first, if	individual)	,							•			
Dusiness	or Dacidan	oo Addeon	s (Number a	nd Stront	City State	Zin Cada)								
Dusiliess (oi Kesideli	ce Addres:	s (ivuilioer a	mu Succi,	City, State,	Zip Code)								
Name of A	Associated	Broker or	Dealer											
States in \	Which Pers	on Listed	Has Solicite	d or Intend	ls to Solici	Purchasers	;							
(Check "	'All States'	or check	individual S	tates)	[CA]	[CO]	[CT]	(DE)	[DC]	(FL)	[CA]	пип		All States
	[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] (TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Name	: (Last nan	ne first, if	individual)											
Business o	or Residen	ce Address	(Number a	nd Street (City State	Zin Code)								
		.,	u		,, 0.000,									
Name of A	Associated	Broker or	Dealer											· · · · · · · · · · · · · · · · · · ·
				(Use t	lank sheet.	or copy an	d use additi	ional copies	of this she	et, as neces	sary.)			

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEED	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify participating, voting and redeemable shares)	\$500,000,000	\$148,551,844
	Total*	\$ <u>500,000,000</u>	\$148,551,844
	Answer also in Appendix, Column 3, if filing under ULOE.	-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE.	0	Aggregate Dollar Amount of Purchases \$148,551,844 \$0 \$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Tumo of	Dollar Amount
	Type of offering	Type of Security	Sold
	Rule 505	555	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>0</u>
	Printing and Engraving Costs		\$ <u>0</u>
	Legal Fees	⊠	\$ <u>65,000</u>
	Accounting Fees		\$ <u>79,500</u>
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		\$ <u>0</u>
	Other Expenses (identify) Miscellaneous (blue sky fees, duplicating, courier, etc.)	⊠	\$ <u>10,000</u>
	Total		\$ <u>154,500</u>
	This is a continuous offering. Therefore, the aggregate offering price could be greater than of	r less than this am	ount

	C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPENSES AND USE	OF PROCEED	S	
	Question 1 and total expenses furnished in	response to Part C - Question 4.a. This difference r."		* \$ <u>499,845,500</u>	
5.	be used for each of the purposes shown. If an estimate and check the box to the left of	gross proceeds to the issuer used or proposed to f the amount for any purpose is not known, furnish f the estimate. The total of the payments listed the issuer set forth in response to Part C - Question			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Payments to		
			Officers, Directors, &	Payments To	
			Affiliates	Others	
	Salaries and fees		□ \$	□ \$	
			☐ \$	☐ \$	
	Purchase, rental or leasing and installation	of machinery and equipment	□ \$	☐ \$	
	Construction or leasing of plant buildings a	\$	☐ \$		
		the value of securities involved in this offering		☐ \$	
	merger)	s or securities of another issuer pursuant to a	<u> </u>	_	
	Repayment of indebtedness		<u> </u>	□ \$	
			□ \$	<u> </u>	
	Other (specify): to be used as described in Memorandum	Issuer's Confidential Private Placement	\$	⊠ \$ <u>499,845,500</u>	
			□ \$	\$499,845,000	
	Total Payments Listed (column totals adde	d)bd)	* × \$499,845,00		
		D. FEDERAL SIGNATURE			
follow	ing signature constitutes an undertaking by the	d by the undersigned duly authorized person. If the issuer to furnish to the U.S. Securities and Excha o any non-accredited investor pursuant to paragraph	nge Commission	, upon written reques	
Issuer (I	Print or Type)	Signature	Date		
	KBAY CAPITAL COMMITMENT HORE FUND, LTD.	hh	31	11 , 2009	
	f Signer (Print or Type)	Title of Signer (Print or Type)			
L	OUISE CURBISHLEY	Authorized signatory of Rockbay Capital Man of the Issuer	agement, LP, the	Investment Manager	

* See asterisked comment on p.4.

ATTENTION

Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)

END